| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | Application or Docket Number 10/530 791 | | | |
|--|---|----------------------------------|--------------|--------------------------------|---------------------|---------------------|------------|---------------------|---|------------|--------------|------------------------|
| | | CLAIMS A | S FILED - I | (Column 2) | | | SMALL ENT | ΊΤΥ | OR | OTHER I | | |
| U.S. NATIONAL STAGE FEES | | | | | , · | | 7 | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | | | | | 1 | EXAM. FEE | - | | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | 1 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minu | / 50 = | | | X \$ 125 = | | | X \$ 250 = | | |
| TOTAL CHARGEABLE CLAIMS | | | 12 min | us 20 = | * | | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | / mi | nus 3 = | * | | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| MULTIPLE DEPENDENT CLAIM PRE | | | SENT | | | 1 | + \$ 180 = | | OR | + \$ 360 = | | |
| * If the difference in column 1 is less than zero, enter *0" in column 2 | | | | | | | | TOTAL | , | OR | TOTAL | 900 |
| L | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | | SMALL E | | | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · 12 | Minus | 2 | 0 | = / | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • 1 | Minus | ** 3 | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | TOTAL ADDIT. | | OR | TØTAL ADDIT. FFF | | | | | | |
| | | (Column 1) | | (Colum | nn 2) | (Column 3) | | / | | / | | |
| 2 | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | EST BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • | Minus | *** | | = | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL | | | | CLAIM | | 11 | + \$ 180 = | , | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |